

**FEC FORM 3L****REPORT OF CONTRIBUTIONS BUNDLED BY  
LOBBYISTS/REGISTRANTS AND LOBBYIST/REGISTRANT PACs**

SECRETARY OF THE SENATE

APR 15 2014 3:51 PM

1. NAME OF COMMITTEE (in full) **Schatz for Senate** USE FEC MAILING OR TYPE OR PRINT **12FE4M5** Example: if typing, type over the lines.

ADDRESS (number and street) **PO Box 3828**

☐ Check if different than previously reported (ACC)

**Honolulu****CITY****HI****STATE****96812****ZIP CODE**2. **FEC IDENTIFICATION NUMBER****C00540732**

3. IS THIS REPORT

☒ **NEW (N)**

OR

☐ **AMENDED (A)**4. **STATE DISTRICT****HI****01**

For Candidates Only

5. **TYPE OF REPORT**  
(Choose One)

(a) Quarterly Reports:

☒ **April 15**

Quarterly Report (Q1)

☐ **July 15**Quarterly Report (Q2)  
and/or Semi-annual Report☐ **October 15**

Quarterly Report (Q3)

☐ **January 31**Year End Report (YE)  
and/or Semi-annual Report☐ **July 31 Mid-Year Report**  
(Non-election Year -  
Party/PAC) (MY) and/or  
Semi-annual Report

(b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year only)  
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year only)

☐ Apr 20 (M4) ☐ Jul 20 (M7) and/or Semi-annual Report ☐ Oct 20 (M10) ☐ Jan 31 (YE) and/or Semi-annual Report

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Special (12S) ☐ Convention (12C)

This report also covers the semi-annual period

Election on  in the State of

☐ See Line 6(b)

(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

This report also covers the semi-annual period

Election on  in the State of

☐ See Line 6(b)6. **Covered Period(s)**

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period

This report covers

**01/01/2014**

through

**03/31/2014**

(b) Semi-Annual Covered Period

and/or ☐ January 1 - June 30☐ July 1 - December 317. **Total Reportable Bundled Contributions by Lobbyists/Registrants or Lobbyist/Registrant PACs**

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period

**\$27,980.00**

(b) Semi-Annual Covered Period

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

**Keith Amemiya****Judith Zamore**

Signature of Treasurer

**4-15-14**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only							
-----------------	--	--	--	--	--	--	--

**FEC FORM 3L**  
02/2009

14020193279